Chronic conditions and health risk behaviors are common in the US island territories and Affiliated Pacific Islands—the US Virgin Islands, Puerto Rico, American Samoa, Guam, Commonwealth of the Northern Marianas Islands (CNMI), Republic of the Marshall Islands (RMI), Federated States of Micronesia (FSM), and Republic of Palau. For example, 93.5% of American Samoan adults are overweight or have obesity, 56% of CNMI adults have high blood pressure, and 25% of Guam adults are current smokers.

These island jurisdictions have small populations and are widely dispersed across two oceans. They represent multiple cultures, languages, and traditions and are susceptible to hurricanes and typhoons, which often result in loss of water, electricity, housing, income, and health services.

Many jurisdictions must send patients off-island for medical treatment, which can add enormous health care costs. Other challenges include:

- Distance from the continental United States, which can limit access to technical assistance.
- Technology limitations, such as reliable Internet connections and phone lines.
- Few staff with public health training.

Starting in 2014, CDC’s Islands Program began coordinating funding across multiple divisions of the National Center for Chronic Disease Prevention and Health Promotion to allow for the most efficient use of resources and public health staff in island jurisdictions. The Islands Program works to close surveillance gaps, reduce risk factors for chronic diseases, and help people with chronic diseases keep their conditions under control to reduce complications.

Building Surveillance Systems to Close Data Gaps

Data on chronic diseases and associated risk factors are lacking or outdated in most of the US territories and Affiliated Pacific Islands. The Islands Program is working to provide local public health staff with the skills to

Compared to the 50 states and District of Columbia:

- **American Samoa** has a higher rate of overweight and obesity (93.5% vs. 70.2%).
- **N. Marianas Islands** has a higher rate of high blood pressure (56% vs. 29%).
- **Guam** has a higher rate of current smoking (25% vs. 15.5%).
collect the data they need to develop and use effective interventions, identify and address gaps in program delivery, and monitor progress in achieving program goals.

For example, the program supported an innovative approach to collecting adult population data on noncommunicable disease (NCD) indicators through the NCD Hybrid Survey. Questions from the Behavioral Risk Factor Surveillance System, National Health and Nutrition Examination Survey, and WHO STEPS surveys were combined in one questionnaire. In addition, participants had their height, weight, blood sugar, cholesterol, and blood pressure measured.

The NCD Hybrid Survey was implemented in CNMI in 2016, in Palau in 2017, and in RMI and American Samoa in 2018. More than 6,900 people participated. Survey data showed that the Affiliated Pacific Islands continue to have worse NCD outcomes compared to the 50 US states and the District of Columbia. In addition, for many of these islands, using smokeless tobacco or chewing betel nut with tobacco continues to be a unique problem.

Reducing Risk Factors for Chronic Diseases

CDC has found that environmental approaches can promote health and support healthy behaviors in schools, worksites, and communities. The islands are using environmental strategies that reduce exposure to secondhand smoke in public places and for workers and children.

For example, the CNMI Department of Health created an educational campaign to raise awareness of the dangers of unregulated tobacco products, including vaporizers, vape pens, hookah pens, e-cigarettes, and e-pipes. E-cigarettes and electronic nicotine delivery systems were defined as tobacco products, and e-cigarettes are now prohibited where smoking tobacco is prohibited. Electronic nicotine delivery systems cannot be sold to anyone younger than 18.

In 2018, CDC released a new funding opportunity that will help the islands prevent type 2 diabetes and manage diabetes complications, prevent and manage high blood pressure and high cholesterol, and improve oral health.

Helping People Manage Their Chronic Conditions to Prevent Complications

The Chronic Disease Self-Management Program (CDSMP) is a 6-week series of workshops for people with arthritis, diabetes, heart disease, lung disease, and other health problems. Proven benefits of CDSMP include less pain, more energy, more physical activity, better communication with health care providers, and more confidence in managing chronic disease.

In 2016, CDC supported training for CDSMP for the Affiliated Pacific Islands. By the end of 2018, nine master trainers had trained 20 people to implement CDSMP workshops in their communities, and 100 people had completed the program.